## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/936543

			CLAIMS		ISLED - PART ( (Column 1)		(Column 2)		SMALL ENTITY			OTHER THAN		
	TOTAL CLAIMS						(00000000000000000000000000000000000000		RATE	FEI			L ENTITY	
	FOR			NUMBI	NUMBER FILED		NUMBER EXTRA		BASIC F			RATE	<del>-  </del>	
	TOTAL CHARGEABLE CLAIMS				minus 20=		·		<b> </b>			BASIC F	EE 860	
- 11	INDEPENDENT CLAIMS			101		*		┨	X\$ 9=		01	X\$18=	102	
II	MULTIPLE DEPENDENT CLAIM P				minus 3 =		7	-	X40=	:	Or	X80=	220	
ŀ	_		<del></del>		<u>:</u>				+135=	.	OF	+270=	270	
	- 11		e in column 1 i				column 2		TOTAL	-	OF	R TOTAL	1557	
1	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER TH					
	4		CLAIMS REMAINING		. HIGH	ST	_(Column 3	, 1	SWAL	ADDI-		SMALL		
	AMENDMENT		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONA		RATE	ADDI- TIONAI FEE	
	S	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Z Z	Independent FIRST PRESE	ENTATION OF M	Minus	***	CL AIN	=		X40=		OR	X80=	<del> </del>	
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		ATTENNESS OF THE PARTY OF THE P	(Column 1)	things have by	(Colum		(Column 3)	. ~	DDIT. FEE	: L		ADDIT. FEE	: <u></u>	
AMENDMENT R			CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	]	RATE	ADDI- TIONAL	
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		Independent	*	Minus	***		=	┞	X40=	ļ	OR	<u> </u>	ļ	
-	1	-IRST PRESEN	NTATION OF MU	JLTIPLE DE	E DEPENDENT CL			┟	740-		OR	X80=	<u> </u>	
		. •						L	+135=		OR	+270=		
l								AC	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
	1 2		(Column 1) CLAIMS	(Column 3)	سسم			_						
AMENDMENT C			REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
END S	┝-	otal		Minus	**		= '		X\$ 9=		OR	X\$18=		
A	┝-	RST PRESEN	TATION OF MU	Minus	TAIDCAIT OF	1	=		X40=	<del></del>	OR	X80=		
		:	<u>.</u>						135=	<del></del>				
• [	fit the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	+270=		
			per Previously Paid or Previously Paid					ADE ound i	NT FEE	ropriate box	OR Al	TOTAL DDIT. FEE		
FORM	PTO	0-875		·	•									
(Rev. 8	/00)						P	alent a	nd Tradema	rk Office, U.	S. DEPAF	RTMENT OF	OMMERCE	
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